

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD.

2008 MAY 19 AM 9:53

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee To Re-elect Tim Hoschek

**IMPORTANT:** Indicate by # type of committee you are reporting for: 5

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Timothy E. Hoschek

Political Party (if applicable)

Democrat

Office Sought

County Board of Supervisors

District (if Senate or House)

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. # \_\_\_\_\_

Logged In \_\_\_\_\_

Scanned \_\_\_\_\_

Computer \_\_\_\_\_

Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Spce A Fine  
SIGNATURE OF PERSON FILING REPORT

319754-1464  
TELEPHONE

5-15-08  
DATE SIGNED

I AM FILING A May 14, 2008 REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR.  
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

6-3-08

County & Local Committees, enter County in  
which Election is held

Des Moines

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) \_\_\_\_\_ \$ 0

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) \_\_\_\_\_

1545.20

Schedule F: Loans Received total (Attach Schedule F) \_\_\_\_\_

Schedule H: Total Sales of Campaign Property (Attach Schedule H) \_\_\_\_\_

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \_\_\_\_\_ \$

1545.20

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) \_\_\_\_\_

192.08

Schedule F: Loan Repayments total (Attach Schedule F) \_\_\_\_\_

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) \_\_\_\_\_ \$

1353.12

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D) \_\_\_\_\_ \$

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \_\_\_\_\_ \$

517.86

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) \_\_\_\_\_ \$

**CONSULTANT BREAKDOWN** (Schedule G Attached?) \_\_\_\_\_

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) \_\_\_\_\_ \$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

**A**  
(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Comm. Htee to Re-elect Tim HoscheK

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1-3-08	ID# CK#	Beverly Patrick 2001 Agency Burlington, IA 52601	N/A	\$ 10.00	<input type="checkbox"/>
3-20-08	ID# CK#	Kenneth Hartman 4972 Sullivan Slough Road Burlington, IA 52601	N/A	\$ 25.00	<input type="checkbox"/>
3-26-08	ID# CK#	Timothy E HoscheK 11302 Valley View Ln Burlington, IA 52601	Self	\$ 221.00	<input type="checkbox"/>
5-1-08	ID# CK#	Leona HoscheK 2930 Cliff Road Burlington, IA 52601	Mother	\$ 300.00	<input type="checkbox"/>
5-2-08	ID# CK#	unitemized contributions from Bake Sale Fundraiser	N/A	\$ 909.20	<input checked="" type="checkbox"/>
5-6-08	ID# CK#	unitemized contributions from Bake Sale Fundraiser	N/A	30.00	<input checked="" type="checkbox"/>
5-10-08	ID# CK#	Elliot & Pat Anderson 119 S. Adams St Burlington, IA 52601	N/A	50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1545.20

TOTAL (if last page of this schedule)

\$ 1545.20

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM



## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Re-elect Tim Hoschek

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4-8-08	ID# CK# 1001	Craftsman Press 203 N. Third Street Burlington, IA 52601	Election Cards	\$ 104.86
4-1-08	ID# CK# —	F&M Bank 221 Jefferson St Burlington, IA 52601	check Fee	\$ 19.00
4-24-08	ID# CK# 1002	The Hawkeye Paper P.O. Box 10 Burlington, IA	Fundraiser ads	\$ 68.22
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 192.08
TOTAL (if last page of this schedule)				\$ 192.08

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to re-elect Tim Hoschek

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND  
CONTRIBUTIONS☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
4-19-08	Sue Frice 11302 Valley View Ln Burlington, IA 52601	N/A	Supplies for Bake Sale Fundraiser	\$ 13.30	<input checked="" type="checkbox"/>
4-26-08	Sue Frice 11302 Valley View Ln Burlington, IA 52601	N/A	Supplies for Bake Sale Fundraiser	\$ 30.56	<input checked="" type="checkbox"/>
5-2-08	Norma Day-Stamper 1033 S. Leeblick Burlington, IA 52601	N/A	Baked Goods for fundraiser	15.00	<input checked="" type="checkbox"/>
5-2-08	Sue Spear P.O. Box 94 Edgewater Beach Burlington, IA	Sister	Baked Goods for Fundraiser	10.00	<input checked="" type="checkbox"/>
5-2-08	Teesa Kershner 11251 North Gear Ave. Burlington, IA	N/A	Baked Goods for fundraiser	20.00	<input checked="" type="checkbox"/>
5-2-08	Mike & Dessie Hoschek 2909 Lawn Avenue Burlington, IA	Cousin	Baked Goods for fundraiser	25.00	<input checked="" type="checkbox"/>
5-2-08	Iris Conor 1803 Sunnyside Burlington, IA	Aunt	Baked Goods for fundraiser	10.00	<input checked="" type="checkbox"/>
5-2-08	Jan & Bill Neese 1714 Koestner Burlington, IA 52601	N/A	Baked Goods for Fundraiser	10.00	<input checked="" type="checkbox"/>
5-2-08	Clarence & Linda Mitchell 313 Cottage Grove West Burlington, IA 52655	N/A	Baked Goods for fundraiser	10.00	<input checked="" type="checkbox"/>
5-2-08	Ron & Wanda Campbell 3298 170th St Burlington, IA 52601	N/A	Baked Goods for fundraiser	4.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 147.86	
TOTAL (if last page of this schedule)				\$	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3  
(for Schedule E)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to re-elect Tim HoscheK

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND

CONTRIBUTIONS

☐ CHECK THIS BOX IF AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
5-2-08	Liz Bukmeyer 1214 Pacific Street Burlington, IA 52601	N/A	Goods for Bake Sale	\$ 4.00	<input checked="" type="checkbox"/>
5-2-08	Jane Spring 10965 160th Street Burlington, IA 52601	N/A	Goods for Bake Sale	4.00	<input checked="" type="checkbox"/>
5-2-08	Kathy Jay 1469 320th Avenue Wever, Iowa 52658	Cousin	Baked Goods to Bake Sale	10.00	<input checked="" type="checkbox"/>
5-2-08	Mrs. Marge Siefken 15384 Hwy 61 Burlington, IA 52601	N/A	Goods for Bake Sale	10.00	<input checked="" type="checkbox"/>
5-2-08	Nancy Pfeiff 11073 North Gear Ave Burlington, IA	N/A	Goods for Bake Sale	18.00	<input checked="" type="checkbox"/>
5-2-08	John Jay 13524 65th Ave. Burlington, IA 52601	Cousin	Goods for Bake Sale	4.00	<input checked="" type="checkbox"/>
5-2-08	Debbie J. Mason 5894 Madison Avenue Burlington, IA 52601	Cousin	Goods for Bake Sale	12.00	<input checked="" type="checkbox"/>
5-2-08	Dorothy & Larry Taeger 14848 Flint Bottom Road Burlington, IA 52601	N/A	Goods for Bake Sale	14.00	<input checked="" type="checkbox"/>
5-2-08	Ernie & Jack Hall 3206 Hwy 61 Burlington, IA 52601	N/A	Goods for Bake Sale	30.00	<input checked="" type="checkbox"/>
5-2-08	Jill & Jay Day 355 N. 1st Street Carthage, IL 62321	N/A	Goods for Bake Sale	10.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$

116.00

TOTAL (if last page of this schedule)

\$

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 3  
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to re-elect Tim HoscheK

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND

CONTRIBUTIONS

☐ CHECK THIS BOX IF AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
5-2-08	Jayne Eckhardt 1976 E. County Road Dallas, TX, IL 62330	N/A	Baked Goods for Bake Sale	\$ 4.00	<input checked="" type="checkbox"/>
5-2-08	Sue Frice 11302 Valley View Ln Burlington, IA 52601	N/A	Baked Goods for Bake Sale	150.00	<input checked="" type="checkbox"/>
5-2-08	LEONA HoscheK 2430 Cliff Rd Burlington IA 52601	Mother	Baked Goods for Bake Sale	100.00	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$

254.00

TOTAL (if last page of this schedule)

\$

517.86

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 3  
(for Schedule E)